

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Northern District of Georgia

Case number (if known): _____ Chapter _____

Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>Affiliated Solutions Company, LLC</u>		
2. All other names debtor used in the last 8 years	<u>Affiliated Truck Sales</u> <u>Affiliated Solutions Company</u>		
Include any assumed names, trade names, and <i>doing business as names</i>	<hr/> <hr/>		
3. Debtor's federal Employer Identification Number (EIN)	<u>8 3 - 4 4 5 8 8 4 9</u>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business	
	<u>Attn: Affiliated Solutions Member</u>	<hr/>	
	<u>345 Hurt Rd Se</u> Number Street	<hr/>	
	<u>Smyrna, GA 30082-3032</u> City State ZIP Code	<hr/>	
	<u>Cobb</u> County	Location of principal assets, if different from principal place of business	
		<hr/>	
		<hr/>	
		Number Street	
		<hr/>	
5. Debtor's website (URL)	<u>https://affiliatedtrucksales.com/</u>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor	Affiliated Solutions Company, LLC Name	Case number (if known)
<p>7. Describe debtor's business</p> <p>A. Check one:</p> <p><input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A)) <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) <input type="checkbox"/> Railroad (as defined in 11 U.S.C. §101(44)) <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A)) <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6)) <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. §781(3)) <input checked="" type="checkbox"/> None of the above</p> <hr/> <p>B. Check all that apply:</p> <p><input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. §501) <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3) <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))</p> <hr/> <p>C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes.</p>		
<p>8. Under which chapter of the Bankruptcy Code is the debtor filing?</p> <p>A debtor who is a "small business debtor" must check the first subbox. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box</p> <p><i>Check one:</i></p> <p><input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11. <i>Check all that apply:</i></p> <p><input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). <input type="checkbox"/> The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). <input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form. <input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.</p> <p><input type="checkbox"/> Chapter 12</p>		
<p>9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?</p> <p>If more than 2 cases, attach a separate list.</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. District _____ When _____ Case number _____ MM / DD / YYYY District _____ When _____ Case number _____ MM / DD / YYYY</p>		
<p>10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?</p> <p>List all cases. If more than 1, attach a separate list.</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Debtor _____ Relationship _____ District _____ When _____ MM / DD / YYYY Case number, if known _____</p>		

Debtor Affiliated Solutions Company, LLC _____ Case number (if known) _____
Name _____

11. Why is the case filed in this district?

Check all that apply:

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other _____

Where is the property? _____

Number _____ Street _____

City _____

State _____ ZIP Code _____

Is the property insured?

No

Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds?

Check one:

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,000-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 10,001-25,000		<input type="checkbox"/> More than 100,000	

15. Estimated assets

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor Affiliated Solutions Company, LLC _____ Case number (if known) _____
Name _____

16. Estimated liabilities

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input checked="" type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/25/2023
MM/ DD/ YYYY



/s/ William Cook

Signature of authorized representative of debtor

William Cook

Printed name

Title

Managing Member

18. Signature of attorney



/s/ Brian Near

Signature of attorney for debtor

Date 08/25/2023

MM/ DD/ YYYY

Brian Near
Printed name

Near Law Firm
Firm name

3867 Holcomb Bridge Rd Ste 500
Number Street

Peachtree Cor
City

GA State 30092-2210 ZIP Code

(770) 242-0850
Contact phone

nearlawfirm@hotmail.com
Email address

536170
Bar number

GA State

Fill in this information to identify the case:

Debtor name Affiliated Solutions Company, LLC

United States Bankruptcy Court for the:
Northern District of Georgia

Case number (if known): _____

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

None

4. Other cash equivalents (Identify all)

None

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.
 Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

None

Debtor Affiliated Solutions Company, LLC _____ Case number (if known) _____
Name _____

None

17. Total of Part 4

Add lines 14 through 16 (including any additional sheets). Copy the total to line 83. _____ **\$0.00**

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.
 Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

19. Raw materials

None

20. Work in progress

None

21. Finished goods, including goods held for resale

None

22. Other inventory or supplies

Title to 2017 Volvo VNL64T780 VIN# 4V4NC9EH2HN973092 sold/delivered to Fadol Brown/Masslanta Express but Title not delivered bc State Sales Tax of \$3,780 was not paid by Buyer
22.1 after repeated requests.

11/02/2022 _____ (Unknown) _____ (Unknown) _____

MM / DD / YYYY

23. Total of Part 5

Add lines 19 through 22 (including any additional sheets). Copy the total to line 84. _____ **\$0.00**

24. Is any of the property listed in Part 5 perishable?

No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No
 Yes

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No
 Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

Debtor Affiliated Solutions Company, LLC
Name

Case number (if known) _____

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

28. Crops — either planted or harvested

None

29. Farm animals Examples: Livestock, poultry, farm-raised fish

None

30. Farm machinery and equipment (Other than titled motor vehicles)

None

31. Farm and fishing supplies, chemicals, and feed

None

32. Other farming and fishing-related property not already listed in Part 6

None

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85.

\$0.00

34. Is the debtor a member of an agricultural cooperative?

No
 Yes. Is any of the debtor's property stored at the cooperative?
 No
 Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

No
 Yes

36. Is a depreciation schedule available for any of the property listed in Part 6?

No
 Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

No
 Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

Debtor Affiliated Solutions Company, LLC
Name

Case number (if known) _____

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

39. Office furniture

None

40. Office fixtures

None

41. Office equipment, including all computer equipment and communication systems equipment and software

41.1 <u>2019 HP laptop computer 1</u>	<u>\$0.00</u>	<u>https://www.itsworthmore.com/sell/laptop</u>	<u>\$35.00</u>
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Additional Page Total - See continuation page for additional entries \$35.00

42. Collectibles Examples: Antiques and figurines; paintings, prints or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

None

43. Total of Part 7

Add lines 39 through 42. Copy the total to line 86. \$70.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

No
 Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No
 Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)			

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

Debtor Affiliated Solutions Company, LLC
Name

Case number (if known) _____

None

48. Watercraft, trailers, motors, and related accessories *Examples:*
Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

None

49. Aircraft and accessories

None

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

None

51. Total of Part 8

Add lines 47 through 50. Copy the total to line 87.

\$0.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No
 Yes

Part 9: Real Property

54. Does the debtor own or lease any real property?

No. Go to Part 10.
 Yes. Fill in the information below.

General description	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available				

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has interest

None

56. Total of Part 9

Add the current value on lines 55.1 through 55.3 and entries from any addition sheets. Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

No
 Yes

Debtor Affiliated Solutions Company, LLC
Name _____

Case number (if known) _____

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No
 Yes

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

60. Patents, copyrights, trademarks, and trade secrets

None

61. Internet domain names and websites

None

62. Licenses, franchises, and royalties

None

63. Customer lists, mailing lists, or other compilations

None

64. Other intangibles, or intellectual property

None

65. Goodwill

None

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers? (as defined in 11 U.S.C. §§ 101(41A) and 107)

No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No
 Yes

Debtor Affiliated Solutions Company, LLC
Name

Case number (if known) _____

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

No. Go to Part 12.
 Yes. Fill in the information below.

Current value of debtor's
interest

71. Notes receivable

Description (include name of obligor)

None

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

None

73. Interests in insurance policies or annuities

None

74. Causes of action against third parties (whether or not a lawsuit has been filed)

None

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

None

76. Trusts, equitable or future interests in property

None

77. Other property of any kind not already listed Examples: Season tickets, country club membership

None

78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No
 Yes

Debtor Affiliated Solutions Company, LLC
Name

Case number (if known) _____

Part 12: Summary

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	<u>\$0.00</u>	
81. Deposits and prepayments. Copy line 9, Part 2.	<u>\$0.00</u>	
82. Accounts receivable. Copy line 12, Part 3.	<u>\$3,780.00</u>	
83. Investments. Copy line 17, Part 4.	<u>\$0.00</u>	
84. Inventory. Copy line 23, Part 5.	<u>\$0.00</u>	
85. Farming and fishing-related assets. Copy line 33, Part 6.	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; collectibles. Copy line 43, Part 7.	<u>\$70.00</u>	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	<u>\$0.00</u>	
88. Real property. Copy line 56, Part 9.....		→ <u>\$0.00</u>
89. Intangibles and intellectual property. Copy line 66, Part 10.	<u>\$0.00</u>	
90. All other assets. Copy line 78, Part 11.	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column.....	91a. <u>\$3,850.00</u>	91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92		<u>\$3,850.00</u>

Debtor Affiliated Solutions Company, LLC _____ Case number (*if known*) _____
Name _____

Additional Page

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
41. Office equipment - <i>Continued</i>			
41.2 <u>2019 HP laptop computer 2</u>	<u>\$0.00</u>	<u>https://www.itsworthmore.com/sell/laptop</u>	<u>\$35.00</u>

Fill in this information to identify the case:

Debtor name Affiliated Solutions Company, LLCUnited States Bankruptcy Court for the: Northern District of Georgia
(State)

Case number (if known): _____

 Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	

2.1 Creditor's name

U.S. Small Business Administration

Describe debtor's property that is subject to a lien

\$32,000.00 \$70.00

Creditor's mailing address

Office of Disaster Assistance2019 HP laptop computer 1, 2019 HP laptop computer 2, Billy Cook Held Petty Cash14925 Kingsport Rd

Describe the lien

Fort Worth, TX 76155-2243Security Agreement

Creditor's email address, if known

Is the creditor an insider or related party?

No

Yes

Date debt was incurred

05/27/2020

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Last 4 digits of account number

7 8 0 5

As of the petition filing date, the claim is:

Check all that apply.

Contingent

Unliquidated

Disputed

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor, and its relative priority.

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$32,000.00

Debtor Affiliated Solutions Company, LLC
Name

Case number (if known) _____

Part 1: Additional Page	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.2 Creditor's name <u>U.S. Small Business Administration</u>	Describe debtor's property that is subject to a lien <u>Title to 2017 Volvo VNL64T780 VIN# 4V4NC9EH2HN973092 sold/delivered to Fadol Brown/Masslanta Express but Title not delivered bc State Sales Tax of \$3,780 was not paid by Buyer after repeated requests.</u>	
Creditor's mailing address <u>Director, Records Mgmt Div</u> <u>409 3rd St., SW</u> <u>Washington, DC 20416</u>	<u>unknown</u>	<u>unknown</u>
Creditor's email address, if known	Describe the lien <u>Security Agreement</u>	
Date debt was incurred <u>05/07/2020</u>	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>7 8 0 5</u>	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	 <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	

Fill in this information to identify the case:

Debtor name Affiliated Solutions Company, LLC

United States Bankruptcy Court for the:
Northern District of Georgia

Case number (if known): _____

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

No. Go to Part 2.

Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address Georgia Department of Revenue Compliance Division ARCS - Bankruptcy 1800 Century Blvd Ne # 9100 Atlanta, GA 30345-3202 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a). (8) Remarks: Taxes on Sale of 2017 Volvo to Masslanta Express LLC would have been \$3,780.00 but sale not recorded due to buyer failing to remit such taxes to Debtor since Nov 2, 2022 after repeated requests.	unknown	unknown
2.2 Priority creditor's name and mailing address Georgia Department of Revenue Compliance Division ARCS - Bankruptcy 1800 Century Blvd Ne # 9100 Atlanta, GA 30345-3202 Date or dates debt was incurred 01/31/2023 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a). (8) Remarks: Tax period ending 1/31/2023	\$30.00	\$30.00

Debtor

Affiliated Solutions Company, LLC

Name

Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim	
3.1 Nonpriority creditor's name and mailing address Interstate Billing Service, Inc. PO Box 2250 Decatur, AL 35609	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supply</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$27,400.00</u>
3.2 Nonpriority creditor's name and mailing address All American Bonds & Insurance PO Box Box 4955 Winter Park, FL 32793	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Premiums</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,355.00</u>
3.3 Nonpriority creditor's name and mailing address FW Fleet Clean, LLC PO Box Box 5059 San Luis Obispo, CA 93403	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Contract Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$917.04</u>
3.4 Nonpriority creditor's name and mailing address Georgia Power Revenue Recovery Po Box 105537 Atlanta, GA 30348-5537	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$221.00</u>
Date or dates debt was incurred Last 4 digits of account number		

Debtor

Affiliated Solutions Company, LLC

Name

Case number (if known) _____

Part 2: Additional Page

3.5	Nonpriority creditor's name and mailing address MASSLANTA EXPRESS LLC Fadol Brown 4053 Staghorn Ct Douglasville, GA 30135-4274	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Purchase Money for 2017 Volvo VNL64T780 Nov Basis for the claim: <u>2022</u>	\$54,000.00
	Date or dates debt was incurred <u>11/02/2022</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
	Remarks: Vehicle sold to Fadol Brown/Masslanta Express, LLC for \$54,000 on 11/2/2022 but title never delivered because state taxes of \$3,780.00 remain unpaid by buyer.		
3.6	Nonpriority creditor's name and mailing address Mitsubishi HC Capital America, Inc. 800 Connecticut Ave 4N Norwalk, CT 06854	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Loan</u>	\$566,234.21
	Date or dates debt was incurred <u>_____</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>1 7 0 1</u>		
3.7	Nonpriority creditor's name and mailing address Truck Paper c/o Sandhills Global PO Box 85673 Lincoln, NE 68501	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Contract Services</u>	\$3,000.00
	Date or dates debt was incurred <u>_____</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>1 8 8 0</u>		
3.8	Nonpriority creditor's name and mailing address United Community Bank 9100 Covington Bypass Covington, GA 30014	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Loan</u>	\$51,738.55
	Date or dates debt was incurred <u>06/30/2022</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>6 2 6 5</u>		

Debtor

Affiliated Solutions Company, LLC

Name

Case number (if known) _____

Part 2: Additional Page

3.9 Nonpriority creditor's name and mailing address

Varsity Driveaway

23716 W. 83rd Terrace

Shawnee, KS 66227

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Basis for the claim: Contract Services

Date or dates debt was incurred _____

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number 3 0 5 4

Remarks: 10/28/22 was last

3.10 Nonpriority creditor's name and mailing address

Wells Fargo Bank, N.A.

420 Montgomery Street

San Francisco, CA 94104

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Basis for the claim: Business Credit Cards

Date or dates debt was incurred _____

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number 7 9 6 3

Debtor Affiliated Solutions Company, LLC Case number (if known) _____

Name _____

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	MASSLANTA EXPRESS LLC Fadol Brown 4053 Staghorn Ct Douglasville, GA 30135-4274	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.2	Mitsubishi HC Capital America 777 International Parkway Suite 240 Flower Mound, TX 75022	Line <u>3.6</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.3	Sanders, Ranck & Skilling, P.C. Brian Ranck, Esq. Po Box 1005 Toccoa, GA 30577-1417	Line <u>3.8</u> <input type="checkbox"/> Not listed. Explain _____	<u>2</u> <u>9</u> <u>8</u> <u>1</u>
4.4	Vanguard Truck Holdings, LLC 34 Old Ivy Rd Ne Ste 200 Atlanta, GA 30342-4560	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	<u>8</u> <u>4</u> <u>6</u> <u>4</u>
4.5	Wells Fargo Card Services P.O. Box 51193 Los Angeles, CA 90051	Line <u>3.10</u> <input type="checkbox"/> Not listed. Explain _____	<u>7</u> <u>9</u> <u>6</u> <u>3</u>

Debtor

Affiliated Solutions Company, LLC

Name

Case number (if known) _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5a.

\$30.00

5b. Total claims from Part 2

5b.

+

\$720,744.80

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c.

\$720,774.80

Fill in this information to identify the case:

Debtor name Affiliated Solutions Company, LLC

United States Bankruptcy Court for the:
Northern District of Georgia

Case number (if known): _____ Chapter 7

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Fill in this information to identify the case:

Debtor name	Affiliated Solutions Company, LLC		
United States Bankruptcy Court for the:	Northern	District of	Georgia
Case number (If known):			

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Debtor Affiliated Solutions Company, LLC Case number (if known) _____
Name

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
	Name	Mailing address	Name
2.4		Street _____ _____	Check all schedules that apply: <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City _____ State _____ ZIP Code _____	
2.5		Street _____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City _____ State _____ ZIP Code _____	
2.6		Street _____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City _____ State _____ ZIP Code _____	

Fill in this information to identify the case:

Debtor name Affiliated Solutions Company, LLC

United States Bankruptcy Court for the:
Northern District of Georgia

Case number (if known): _____ Chapter 7

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real Property:**

Copy line 88 from *Schedule A/B*.....

_____ \$0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*.....

_____ \$3,850.00

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*.....

_____ \$3,850.00

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

_____ \$32,000.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

_____ \$30.00

3b. **Total amount of claims of non-priority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ _____ \$720,744.80

4. **Total liabilities.....**

Lines 2 + 3a + 3b

_____ \$752,774.80

Fill in this information to identify the case:

Debtor name Affiliated Solutions Company, LLC

United States Bankruptcy Court for the:
Northern District of Georgia

Case number (if known): _____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year	Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date: From <u>01/01/2023</u> to <u> </u> MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$78,000.00
For prior year: From <u>01/01/2022</u> to <u>12/31/2022</u> MM/ DD/ YYYY MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$3,707,818.00
For the year before that: From <u>01/01/2021</u> to <u>12/31/2021</u> MM/ DD/ YYYY MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$4,590,837.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

From the beginning of the fiscal year to filing date:	Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From <u>01/01/2023</u> to <u> </u> MM/ DD/ YYYY	William Cook, Member	\$12,000.00
For prior year: From <u>01/01/2022</u> to <u>12/31/2022</u> MM/ DD/ YYYY MM/ DD/ YYYY	William Cook, Member	\$25,000.00
For the year before that: From <u>01/01/2021</u> to <u>12/31/2021</u> MM/ DD/ YYYY MM/ DD/ YYYY		

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1. Creditor's name			<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street			
City State ZIP Code			

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Mitsubishi HC Capital America, Inc. Creditor's name 800 Connecticut Ave 4N Street Norwalk, CT 06854 City State ZIP Code	01/27/2023 02/03/2023 12/21/2022	\$45,735.87	Inventory Line of Credit
Relationship to debtor			
Creditor			
4.2. Interstate Billing Service, Inc. Creditor's name PO Box 2250 Street Decatur, AL 35609 City State ZIP Code	12/12/2022 06/27/2022 07/21/2022 06/21/2023 08/10/2022 10/13/2022	\$26,631.21	Loan Payments
Relationship to debtor			
Creditor			

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Mitsubishi HC Capital America, Inc. Creditor's name 800 Connecticut Ave 4N Street Norwalk, CT 06854 City State ZIP Code	Semi Tractor Inventory: 2015 International Prostar / VIN: x9986 / \$25,738.00 by JD Power 2017 International Prostar / VIN: x1298 / \$38,300.00 by JD Power 2015 International Prostar / VIN: x6223 / \$24,738.00 by JD Power 2016 International Prostar / VIN: x0124 / \$29,288.00 by JD Power 2016 International Prostar / VIN: x0145 / \$27,888.00 by JD Power 2018 Volvo VNL670 / VIN: x6049 / \$58,510.00 by JD Power 2018 Volvo VNL670 / VIN: x6040 / \$57,590.00 by JD Power 2018 Volvo VNL670 / VIN: x6052 / \$57,750.00 by JD Power 2018 Volvo VNL670 / VIN: x6027 / \$53,550.00 by JD Power 2016 Freightliner Cascadia / VIN: x3466 / \$38,595.00 by JD Power 2018 Volvo VNL670 / VIN: x6041 / \$58,470.00 by JD Power 2017 International Prostar / VIN: x8758 Rep / \$37,500.00 by JD Power 2016 International Prostar / VIN: x5538 Rep / \$28,085.00 by JD Power	03/03/2023	\$536,002.00

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
6.1. Creditor's name Street City State ZIP Code	XXXX- - - -		

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. United Community Bank vs. Affiliated Solutions Company, LLC, et. al.	Complaint on Note and Personal Guaranty	Cobb State Court Name 12 E Park Sq Street Building B, First Floor Civil Division Marietta, GA 30090-0115 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number 23-A-2981			

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

8.1. Custodian's name and address	Description of the property	Value
Custodian's name	Case title	Court name and address
Street		Name
City	Case number	Street
State		
ZIP Code	Date of order or assignment	City
		State
		ZIP Code

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

9.1. Recipient's name and address	Description of the gifts or contributions	Dates given	Value
Recipient's name			
Street			
City	State	ZIP Code	
Recipient's relationship to debtor			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		
10.1. _____	_____	_____	_____

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

11.1. Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
Near Law Firm	Attorney's Fee	02/27/2023	\$3,850.00
Address			
3945 Holcomb Bridge Rd. 203 Street			
Peachtree Corners, GA 30092-5200 City State ZIP Code			
Email or website address			
billy@affiliatedtrucks.com			
Who made the payment, if not debtor?			
Affiliated Solutions Company LLC			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

12.1. Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Trustee			

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

13.1. Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
William Bruce	Used office equipment: 4 Chairs, 2 monitors, water cooler, mini fridge, and two desks. Sold for \$350.00	03/20/2023	\$350.00
Address			
Street			
GA			
City	State	ZIP Code	
Relationship to debtor			
None			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
14.1. 264 Main St Ste A Street	From 11/15/2019 To 05/18/2020
Forest Park, GA 30297-1762 City State ZIP Code	
14.1. 7290 Delta Cir Street	From 05/15/2020 To 03/31/2023
Austell, GA 30168-7404 City State ZIP Code	

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care	
Facility name			
Street	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.		
City	State	ZIP Code	How are records kept?
			<i>Check all that apply:</i>
			<input type="checkbox"/> Electronically
			<input type="checkbox"/> Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

No.

Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

No

Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

No, Go to Part 10.

Yes. Does the debtor serve as plan administrator?

No. Go to Part 10.

Yes. Fill in below:

Has the plan been terminated?

Employer identification number of the plan

EIN: - - - - - -

Has the plan been terminated?

No

Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
United Community Bank	XXXX- <u>8</u> <u>2</u> <u>9</u> <u>0</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	05/10/2023	\$0.00
Name				
9100 Covington Bypass				
Street				
Covington, GA 30014				
City	State	ZIP Code		

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

19.1 Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____	_____	_____	<input type="checkbox"/> No
Street _____	_____	_____	<input type="checkbox"/> Yes
Address		_____	
City _____	State _____ ZIP Code _____	_____	
_____	_____	_____	

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

20.1 Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____	_____	_____	<input type="checkbox"/> No
Street _____	_____	_____	<input type="checkbox"/> Yes
Address		_____	
City _____	State _____ ZIP Code _____	_____	_____
_____	_____	_____	

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
MASSLANTA EXPRESS LLC Name _____ 4053 Staghorn Ct Street _____ Fadol Brown Douglasville 30135-4274 City _____	345 Hurt Rd Se Smyrna, GA 30082-3032	Paper Title to a 2017 Volvo VNL64T780 paid for on 11/2/2022 claiming tax exempt. Related to Claim of Masslanta and listed in Other Inventory	\$0.00
GA			
State _____ ZIP Code _____			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

■ Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name Street City State ZIP Code		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name Street City State ZIP Code	Name Street City State ZIP Code		

24. Has the debtor notified any governmental unit of any release of hazardous material?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name Street City State ZIP Code	Name Street City State ZIP Code		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Affiliated Solutions Company, LLC

Name

Business name and address**Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

25.1.

Name

Street

City State ZIP Code

EIN: -----

Dates business existed

From _____ To _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

 None**Name and address****Dates of service**

26a.1.

Name

From _____ To _____

Street

City State ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

 None**Name and address****Dates of service**

26b.1.

Name

From _____ To _____

Street

City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

 None**Name and address****If any books of account and records are unavailable, explain why**

26c.1.

Name

Street

City State ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

 None

Name and address

26d.1.

Name _____
 Street _____

 City _____ State _____ ZIP Code _____

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
_____	_____	_____

Name and address of the person who has possession of inventory records

27.1.

Name _____
 Street _____

 City _____ State _____ ZIP Code _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Underwood, Brett	201 N Lancaster Ct Wichita, KS 67230-7807	Officer, Managing Member	50.00%
Cook, William	345 Hurt Rd Se Smyrna, GA 30082-3032	Officer, Managing Member	50.00%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
_____	_____	_____	From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

30.1. Underwood, Brett \$12,000.00 09/15/2022 Salary
 Name
201 N Lancaster Ct
 Street

Wichita, KS 67230-7807
 City State ZIP Code

Relationship to debtor

Managing Member

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

30.2. Cook, William \$12,000.00 09/15/2022 Salary
 Name
345 Hurt Rd Se
 Street

Smyrna, GA 30082-3032
 City State ZIP Code

Relationship to debtor

Managing Member

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No

Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
_____	EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No

Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
_____	EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/25/2023
 MM/ DD/ YYYY

X /s/ William Cook

Signature of individual signing on behalf of the debtor

Printed name William Cook

Position or relationship to debtor Managing Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

No

Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Northern District of Georgia

In re Affiliated Solutions Company, LLC

Case No. _____

Debtor Chapter _____ 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$3,850.00
Prior to the filing of this statement I have received	\$3,850.00
Balance Due	\$0.00

2. The source of the compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor' s financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Anything not INCLUDED above.

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/25/2023
Date

/s/ Brian Near

Brian Near
Signature of Attorney

Bar Number: 536170
Near Law Firm
3867 Holcomb Bridge Rd Ste 500
Peachtree Cor, GA 30092-2210
Phone: (770) 242-0850

Near Law Firm
Name of law firm

IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION

IN RE: **Affiliated Solutions Company, LLC**

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 08/25/2023 Signature /s/ William Cook
William Cook, Managing Member

Interstate Billing Service, Inc.
PO Box 2250
Decatur, AL 35609

All American Bonds &
Insurance
PO Box Box 4955
Winter Park, FL 32793

Brett Underwood
201 N Lancaster Ct
201 N Lancaster Ct
Wichita, KS 67230-7807

William Cook
345 Hurt Rd Se
Smyrna, GA 30082-3032

FW Fleet Clean, LLC
PO Box Box 5059
San Luis Obispo, CA 93403

Georgia Department of
Revenue
Compliance Division ARCS - Bankruptcy
1800 Century Blvd Ne # 9100
Atlanta, GA 30345-3202

Georgia Power
Revenue Recovery
Po Box 105537
Atlanta, GA 30348-5537

MASSLANTA EXPRESS LLC
Fadol Brown
4053 Staghorn Ct
Douglasville, GA 30135-4274

Mitsubishi HC Capital America
777 International Parkway Suite 240
Flower Mound, TX 75022

Mitsubishi HC Capital
America, Inc.
800 Connecticut Ave 4N
Norwalk, CT 06854

Sanders, Ranck & Skilling,
P.C.
Brian Ranck, Esq.
Po Box 1005
Toccoa, GA 30577-1417

Truck Paper
c/o Sandhills Global
PO Box 85673
Lincoln, NE 68501

U.S. Small Business
Administration
Office of Disaster Assistance
14925 Kingsport Rd
Fort Worth, TX 76155-2243

U.S. Small Business
Administration
Director, Records Mgmt Div
409 3rd St., SW
Washington, DC 20416

Brett Underwood
201 N Lancaster Ct
Wichita, KS 67230-7807

United Community Bank
9100 Covington Bypass
Covington, GA 30014

Vanguard Truck Holdings, LLC
34 Old Ivy Rd Ne Ste 200
Atlanta, GA 30342-4560

Varsity Driveaway
23716 W. 83rd Terrace
Shawnee, KS 66227

Wells Fargo Bank, N.A.
420 Montgomery Street
San Francisco, CA 94104

Wells Fargo Card Services
P.O. Box 51193
Los Angeles, CA 90051